

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 73 | 6/10 |
| FORMALITY REVIEW | UT | 2508 | 8-8-01 |
| RESPONSE FORMALITY REVIEW | PM | 853 | 10-01-01 |
| | | 886 | 26-14-01 |
| | | | 10-03-02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| Final Original | |
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| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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373
 6/24/02
 830
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